



AUTHORIZED SIGNATURES  
OFFICE OF ADMINISTRATION  
DIVISION OF PERSONNEL

	LAST NAME	FIRST NAME, M	NOTES	STREET ADDRESS	CITY, STATE ZIP	EMAIL ADDRESS	OFFICE PHONE NO
SA	Brunson	Kelly		Truman Building Room 430	Jefferson City, MO	kelly.brunson@oa.mo.gov	573-526-1057
SA	Caruthers	Brandi		Truman Building Room 430	Jefferson City, MO	brandi.caruthers@oa.mo.gov	573-751-3053
AA	Johnston	Nancy	Director	Truman Building Room 430	Jefferson City, MO	nancy.johnston@oa.mo.gov	573-751-3053

\*SA = SIGNATURE AUTHORITY

AA = APPOINTING AUTHORITY

POC = POINT OF CONTACT